

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number: 46846		2. Page 1 of 3		3. Emergency Response Phone		4. Manifest Tracking Number: 008037730 FLE	
5. Generator's Name and Mailing Address: 2649 North New York Street Wilkes, KS 67219 (316) 269-7400					Generator's Site Address (if different than mailing address): SAME				
6. Transporter 1 Company Name: CLEAR HARBOUR					U.S. EPA ID Number: MD03932250				
7. Transporter 2 Company Name:					U.S. EPA ID Number:				
8. Designated Facility Name and Site Address: Kimball NE 68145 (308) 235-4012					U.S. EPA ID Number: NE0981723513				
Facility's Phone:									
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes		
			No.	Type					
	x	1. <del>HAZARDOUS WASTE, SOLID, N.O.C. (TOLUENE, LEAD), 9, PG III</del>	1	CM	EST 12	Y	0001	0005	0007
		2.					0008	0016	0040
		3.							
	4.								
14. Special Handling Instructions and Additional Information: TRUCK # 1003 CHRT # 24629									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Offor's Printed/Typed Name: Jim Tyson					Signature: Jim Tyson		Month Day Year: 2 11 15		
INT'L	16. International Shipments: <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:								
	17. Transporter Acknowledgment of Receipt of Materials								
TRANSPORTER	Transporter 1 Printed/Typed Name: Galo Naranjo					Signature: GALO NARANJO		Month Day Year: 2 11 15	
	Transporter 2 Printed/Typed Name:					Signature:		Month Day Year:	
DESIGNATED FACILITY	18. Discrepancy								
	18a. Discrepancy Indication Space: <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
	Manifest Reference Number:								
	18b. Alternate Facility (or Generator):					U.S. EPA ID Number:			
	Facility's Phone:								
	18c. Signature of Alternate Facility (or Generator):								
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
	1. H010	2.	3.	4.					
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
	Printed/Typed Name:					Signature:		Month Day Year:	

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>K5D007246846</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(800) 483-3718</b>	4. Manifest Tracking Number <b>008037730 FLE</b>		
5. Generator's Name and Mailing Address <b>Clean Harbors Kansas LLC 2549 North New York Street Wichita, KS 67219 (316) 269-7400</b>			Generator's Site Address (if different than mailing address) <b>SAME</b>				
6. Transporter 1 Company Name <b>Clean HAR BORS</b>			U.S. EPA ID Number <b>MUD03932250</b>				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address <b>Clean Harbors Env Services Inc 2247 South Highway 71 Kimball, NE 69145 (308) 235-4012</b>			U.S. EPA ID Number <b>NED981723513</b>				
Facility's Phone:							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No.	Type			
	<b>x</b>	<b>HA3077, HAZARDOUS WASTE, SOLID, N.O.S., (TOLUENE, LEAD), 9, PG III</b>	<b>1</b>	<b>CM</b>	<b>Est 12</b>	<b>y</b>	<b>D004 D005 D007 D008 D039 D040</b>
14. Special Handling Instructions and Additional Information <b>1. CHRG 1506X0B ERG#171</b> <div style="text-align: center; font-size: 1.5em; font-weight: bold;">TRUCK # <sup>1603</sup> CHRT # <sup>24629</sup></div>							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name <b>Jim Tyson</b>			Signature <i>Jim Tyson</i>			Month Day Year <b>2 11 15</b>	
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name <b>Galo Naranjo</b> Signature <i>GALO NARANJO</i> Month Day Year <b>2 11 15</b> Transporter 2 Printed/Typed Name _____ Signature _____ Month Day Year _____						
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number: _____						
	18b. Alternate Facility (or Generator) U.S. EPA ID Number _____						
	Facility's Phone: _____						
18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. <b>H040</b>		2. _____		3. _____		4. _____	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name <b>Thomas Clark</b>			Signature <i>Thomas Clark</i>			Month Day Year <b>02 12 15</b>	

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number KSD007246846	2. Page 1 of 1	3. Emergency Response Phone (505) 463-3718	4. Manifest Tracking Number <b>008037730 FLE</b>						
5. Generator's Name and Mailing Address <b>Clean Harbors Remediation LLC</b> <b>2549 North New York Street</b> <b>Richmond, KS 67219</b> <b>(316) 269-7400</b>		Generator's Site Address (if different than mailing address) <b>SAME</b>									
Generator's Phone:											
6. Transporter 1 Company Name <b>Clean Harbors</b>				U.S. EPA ID Number <b>MND03932250</b>							
7. Transporter 2 Company Name				U.S. EPA ID Number							
8. Designated Facility Name and Site Address <b>Clean Harbors Env Services Inc</b> <b>2247 South Highway 71</b> <b>Kimball, NE 68145</b> <b>(308) 735-4012</b>				U.S. EPA ID Number <b>NED981723513</b>							
Facility's Phone:											
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))  <b>1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (TOLUENE, LEAD), S. PG III</b>			10. Containers		11. Total Quantity <b>Est 12</b>	12. Unit Wt./Vol. <b>Y</b>	13. Waste Codes <b>D004 D005 D007 D008 D039 D040</b>			
				No.	Type						
				<b>1</b>	<b>CM</b>						
14. Special Handling Instructions and Additional Information <b>1. CHRT # 1603</b> <b>TRUCK # CHRT # 24629</b>											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offor's Printed/Typed Name <b>Jim Tyson</b>				Signature <i>Jim Tyson</i>		Month <b>2</b>		Day <b>11</b>		Year <b>15</b>	
16. International Shipments <input checked="" type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:											
17. Transporter Acknowledgment of Receipt of Materials											
Transporter 1 Printed/Typed Name <i>Gale Naranjo</i>				Signature <b>GALE NARANJO</b>		Month <b>2</b>		Day <b>11</b>		Year <b>15</b>	
Transporter 2 Printed/Typed Name				Signature		Month		Day		Year	
18. Discrepancy											
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection											
Manifest Reference Number:											
18b. Alternate Facility (or Generator) U.S. EPA ID Number											
Facility's Phone:											
18c. Signature of Alternate Facility (or Generator) Month Day Year											
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1. <b>H040</b>		2.		3.		4.					
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a											
Printed/Typed Name <b>Thomas Clark</b>				Signature <i>Thomas Clark</i>		Month <b>02</b>		Day <b>12</b>		Year <b>15</b>	



2247 South Highway 71  
Kimball, NE 69145

TEL 308-235-4012  
FAX 308-235-4307  
www.cleanharbors.com

DATE: 2/12/2015

MANIFEST: 008037730FLE

Dear Valued Customer:

In accordance with 40 CFR 264.12(b), Clean Harbors Environmental Services, Inc., Kimball Facility, has appropriate state and federal permits to accept, store, and/or treat the waste you shipped to our facility. This letter should be kept on file with your copy of the signed manifest.

Clean Harbors Environmental Services, Inc. makes every effort to ensure that signed copies of manifests are returned to the waste generator as quickly as possible following receipt of your waste at our facility. This allows us to provide you with rapid verification that your waste shipment arrived safely at our waste management facility.

Once your waste has been received, Clean Harbors' personnel will verify that the quantity that has been received matches the quantity that was shipped. We also inspect the material and conduct testing to ensure that it meets the facility's waste acceptance criteria as described in our Waste Analysis Plan, as well as processing requirements. Every effort is made to complete the waste verification as quickly as possible; however, it is possible that the signed copy of the manifest may be returned to you before the waste verification process is completed. If a significant discrepancy, as defined by US EPA regulations (40 CFR 264.72), is discovered during the waste verification process, we will contact you in order to reconcile the discrepancy. Additionally, we will work with you to make any corrections to the waste manifest that are necessary.

Sincerely,

Receiving Department